

UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY

DeBeen A. Wolfford

11 Marshall St Passic County Jail 4G-2 unit

Paterson New Jersey 07501
(In the space above enter the full name(s) of the plaintiff(s).)

- against -

Jonathan K. Bustios (Both) #4818#

Mathew Torres (Both) #4849#

Employed by Paterson Police Department

111 Broadway Paterson ng 07501

COMPLAINT

Jury Trial: ☒ Yes ☐ No

(check one)

Alexis Torres #4869# (witness) To Avert)

John Fardas #4813# (witness To Avert)

Frank Torleaga #4834# (witness) To Avert)

Employed by Paterson Police Department

111 Broadway Paterson New Jersey 07501

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff	Name	<u>Dereen A. Wolfford</u>
	Street Address	<u>11 Marsh St Passic County Jail 4G-2 unit</u>
	County, City	<u>Passic Paterson ng 07501</u>
	State & Zip Code	<u>New Jersey 07501</u>
	Telephone Number	<u>N/A</u>

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name Jonathan K. Bustios #4818#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

Defendant No. 2

Name Mathew Torres #4849#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

Defendant No. 3

Name John farfan #4813#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

Defendant No. 4

Name Alexis Torres #4809# FRANK Tolero #4834#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. There are four types of cases that can be heard in federal court: 1) Federal Question - Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case; 2) Diversity of Citizenship - Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case; 3) U.S. Government Plaintiff; and 4) U.S. Government Defendant.

- A. What is the basis for federal court jurisdiction? (check all that apply)

☐ Federal Questions ☐ Diversity of Citizenship
☒ U.S. Government Plaintiff ☐ U.S. Government Defendant

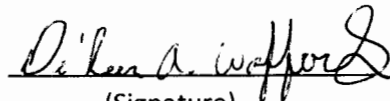
- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? (2) Diversity of Citizenship - Under 28 U.S.C. § 1332.

Permitive Damage's personal injury by government official
(3) gun shot's wound's while HAND cuffed behind my back lying face down
(Reasonable speaking) "Respectfully submitted"

Helpful Hints:

- ~ All original papers submitted for consideration to the Court are to be filed with the **Clerk of this Court**. Copies of papers filed in this Court are to be served upon counsel for all other parties (or directly on any party acting pro se). Proof that service has been made is provided by a certificate of service. This certificate should be filed in the case along with the original papers and should show the day and manner of service.

Example: "I, (name), do hereby certify that a true and correct copy of the foregoing (name of pleading or other paper) has been served upon (name(s) of person(s) served) by placing the same in the U.S. Mail, properly addressed this (date) day of (month), (year)."


(Signature)

- ~ Any request for court action shall be set forth in a motion, properly filed and served. (Please see the Motion Guide included in this packet.)
- ~ No direct communication is to take place with the District Judge or United States Magistrate Judge with regard to this case. **All relevant information and papers are to be directed to the Clerk.**
- ~ The parties should notify the Clerk's office when there is an address change. Failure to do so could result in court orders or other information not being timely delivered, which could affect the parties' legal rights.

5/15/2017

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship Citizen U.S.

Defendant(s) state(s) of citizenship Citizen U.S. Officers Paterson Police Department

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 117 Martin St 21 Ave ^{APT #3} Paterson NJ 07601
Second floor,

B. What date and approximate time did the events giving rise to your claim(s) occur? ON The above
DATE AND TIME 12/30/2016 Approx 105PM

C. Facts: ON The above date and time 12/30/2016 105PM (S) Paterson Police officers
was dispatched to the above location 117 Martin St 21 Ave ^{APT #3} second floor ON
A Domestic Dispute in which officer's proceed to break down the front door
of my apartment ^{ex} 117 Martin St 21 Ave, punch and strike me with close fist and kick
me in the face Officer Jonathan K. Bustos #4818 stood up over top of me
After officer Matthew Torres ^{#4849} punched and kick me several times #Matthew Torres #4849
struck me several times in the head face area then kick me after he handcuffed me
behind my back lying face down on the floor officer Jonathan K. Bustos stood up
over me a fired (3) shot (2) of which struck my lower extremities
calves's Brain Right leg and left leg calves and (1) shot in which broke
my humeral humerus Bone all posterior bilateral entry wounds from
behind in which you would call this type of shooting (tactical kill shots)
(3) other officer's were on scene however prior to shooting did not
enter the apartment yet all officer state they never seen (me)
with a (weapon) nor did they hear command's given by any
officer's prior to the shooting (Please Refer) to (Passic County)
"Investigative Report" from the prosecutors offices pg. 15 all officer
stated they never gave command's nor seen me with a (weapon)
(prior to the shooting) Officer (Frank Toranzo) states He discovers me lying (sof 15)
face down on the floor in hallway near bedroom) Please Refer to pg. 5 of 15
Last To scenes states by officer Frank Toranzo #4834 (#variable Respectfully submitted.)

What
happened
to you?

Who did
what?

Was
anyone
else
involved?

Who else
saw what
happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

bruises swelling to my head and face area,
As well as (3) gunshot wounds posterior and bilateral from
behind why I was handcuffed lying face down on floor
(1) bullet remains lodged in my upper lumbar spine still
which I believe may further go to prove my injuries to this
(initial incident) if evidence would be removed from my physical
I have major displacement and suffered a fracture which
is permanently displaced my left shoulder, and severe leg
pain in both right and left legs. (Reasonable speaking)

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

To pay for all medical and losses wages medical
(therapy out of pocket) once allowed to have my freedom
(Release) (annually) A.S.A.P.) and amount of 2,000,000,000
million dollars I will never be the same nor will I
walk the same or be able to hold my right fulltime
of work (master mechanic) do to displacement fractures

MY ADD medical Release 2,000,000,000, million dollars

All legal fees and medical paid by the
persons being sued

(Reasonable and respectfully submitted)

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 15 day of 5/15/, 2017.

Signature of Plaintiff *De'Ann A. Wofford*
Mailing Address 11 Marshall St Paterson NJ P.C.J. 49-2 unit
Passic County Jail 49-2 unit
Paterson New Jersey 07501
Telephone Number N/A
Fax Number (if you have one) N/A
E-mail Address N/A

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint.

Signature of Plaintiff: *De'Ann A. Wofford*